Going for the Gold: Achieving CEO Cancer Gold Standard™ Accreditation
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Recommended Citation


Background Information
CEO Cancer Gold Standard Website: www.cancergoldstandard.org/
# Table of Contents

Foreword ................................................................................................................................. iv

Introduction ................................................................................................................................ 1

Going for the Gold ..................................................................................................................... 2
  Overview ................................................................................................................................. 2
  CEO Cancer Gold Standard Five Pillars ................................................................................. 3

Winning the Gold: Telling Our Story ....................................................................................... 8
  Applying for the Gold: Lessons Learned ............................................................................... 8
  Our Story .............................................................................................................................. 10

Organization Readiness .......................................................................................................... 13
  Organizational Buy-in .......................................................................................................... 13

Preparing a Successful Application ......................................................................................... 16
  Getting Started ................................................................................................................... 16
  Evidence-Based Programs in Cancer Prevention ................................................................. 21
  Our Example: Completing Our Application ....................................................................... 22

Commitment to the CEO Cancer Gold Standard ...................................................................... 28
  Post-Accreditation Phase .................................................................................................... 28
  Yearly Re-accreditation ....................................................................................................... 29

Appendices ............................................................................................................................. 30
  Appendix A. Informational Fact Sheet Used with SPH Leadership ..................................... 30
  Appendix B. Texas A&M University’s Smoking & Tobacco Use Policy ......................... 31
  Appendix C. Needs Assessment (Disseminated 2013) ....................................................... 34
  Appendix D. Template for Needs Assessment Summary Brief ........................................ 42
  Appendix E. Action Plan Template .................................................................................... 44
  Appendix F. Cancer Prevention, Treatment, and Survivorship ........................................ 46

References ............................................................................................................................... 51
Within six months after the CEO Roundtable on Cancer was founded by former President George H.W. Bush, the CEO Cancer Gold Standard™ was created inviting employers to become a prime partner in the effort to eradicate cancer.

The Gold Standard ensures that employers not only better understand the vital role they play in the health of their employees, families and community, but also it provides them with a means by which to develop, enhance and celebrate its life-enhancing principles and practices.

Since the Gold Standard was created in collaboration with the National Cancer Institute, along with many other leading cancer centers, this comprehensive workplace-based initiative, focusing on prevention, early diagnosis and quality cancer treatment, has grown to become a beacon of hope and health in the fight against cancer - not just in the United States, but for millions more around the globe.

It is appropriate that this Gold Standard Guidebook comes from the Texas A&M University at College Station, Texas, since it is the home to the George H. W. Bush Presidential Library. It is also the birthplace of the CEO Roundtable on Cancer and its Gold Standard. Indeed, our foundational meetings were hosted by the President and Mrs. Bush on the Texas A&M campus.

Beginning, of course, with President and Mrs. Bush, we thank everyone in Aggieland, and notably the authors of this valuable guide, for creating such a clear, comprehensive and inviting roadmap that will encourage employers to work with and on behalf of their employees to lower the risk of cancer, detect it early, and ensure access to high-quality care.

We hope that millions will use it ...

In Good Health,

Martin J. Murphy, DMedSc, PhD, FASCO
Chief Executive Officer
CEO Roundtable on Cancer

“The CEO Cancer Gold Standard is a powerful program that advances the elimination of cancer as a public health threat. But on a more personal level, it also is a boon to employees and their families. As such, I take great pride in the CEO Roundtable on Cancer that developed the Gold Standard and I urge businesses large and small, for-profit and not-for-profit, to embrace it. This is a marvelous example of America’s corporate leadership at its golden best.”

Going for the Gold: Achieving CEO Cancer Gold Standard Accreditation
Introduction

On December 1, 2013, the Texas A&M Health Science Center (TAMHSC) School of Public Health (SPH) received CEO Cancer Gold Standard accreditation. Achieving CEO Cancer Gold Standard accreditation is a major accomplishment because this accolade reflects what our organization values most: promoting healthy lives and communities.

In the application process, we learned many lessons that could benefit other businesses and organizations applying for CEO Cancer Gold Standard accreditation. Based on our experience, we developed the “Going for Gold” Guidebook as a “how-to” resource to provide practical tips for those who are applying for CEO Cancer Gold Standard accreditation. The guidebook complements the existing resources available on the CEO Cancer Gold Standard website. Our main goal is to demystify the application process. While there is work involved in gathering the documentation, it is a doable process.

For those who are contemplating whether or not to seek this status, we would like our story to be an example that accreditation is within their reach, especially for worksites that make employee wellness a priority. It is our hope that this resource will help increase the number of small to mid-size employers that are CEO Cancer Gold Standard accredited worksites, because these organizations employ the majority of our U.S. workforce.\(^1\) In closing, we wish you success in your efforts to “Go for the Gold”!\(^1\)

Our message:

*CEO Cancer Gold Standard accreditation is achievable!*
Overview

*CEO Cancer Gold Standard* is a workplace initiative to reduce the burden of cancer by improving the health of employees and their family members. Eliminating cancer is the vision of the *CEO Cancer Gold Standard*. The CEO Roundtable on Cancer, a non-profit organization comprised of chief executive officers representing major U.S. employers, developed the *CEO Cancer Gold Standard* as a set of requirements to promote cancer prevention in worksites. A *CEO Cancer Gold Standard* accreditation recognizes employers demonstrating their commitment to this effort. Accreditation is open to worksites regardless of the number of employees. Promoting a culture of wellness can be accomplished by both small and large worksites using a variety of creative strategies to meet their unique needs and their level of involvement in offering workplace health promotion programs.

Broad spectrums of industries are *CEO Cancer Gold Standard* accredited: health, non-profit groups, academic institutions, and various other businesses (see Table 1). A common thread that unites these employers is their dedication to promote a healthier workforce. Achieving *CEO Cancer Gold Standard* accreditation sets these employers apart as leaders in cancer prevention, detection, and quality care. Together, these organizations are building a culture of wellness where programs and policies are in place to encourage the health and well-being of their work force and, by example, the community at large.
**Table 1. Examples of CEO Cancer Gold Standard Accredited Organizations**

<table>
<thead>
<tr>
<th>Organization</th>
<th>Industry Type</th>
<th># of Employees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lowes</td>
<td>Retail</td>
<td>&gt;100,000</td>
</tr>
<tr>
<td>Mayo Clinic</td>
<td>NCI-Designated Cancer Center</td>
<td>10,001-100,000</td>
</tr>
<tr>
<td>MD Anderson Cancer Center</td>
<td>NCI-Designated Cancer Center</td>
<td>10,001-100,000</td>
</tr>
<tr>
<td>Aetna</td>
<td>Insurance</td>
<td>10,001-100,000</td>
</tr>
<tr>
<td>Centers for Disease Control and Prevention</td>
<td>Government</td>
<td>10,001-100,000</td>
</tr>
<tr>
<td>Quest Diagnostics</td>
<td>Health Services</td>
<td>10,001-100,000</td>
</tr>
<tr>
<td>National Cancer Institute</td>
<td>Government</td>
<td>2,001-10,000</td>
</tr>
<tr>
<td>Harvard School of Public Health</td>
<td>University</td>
<td>2,001-10,000</td>
</tr>
<tr>
<td>Harris Health System</td>
<td>Hospitals</td>
<td>2,001-10,000</td>
</tr>
<tr>
<td>Susan G. Komen</td>
<td>Oncology Organization</td>
<td>100-2,000</td>
</tr>
<tr>
<td>American Cancer Society</td>
<td>Oncology Organization</td>
<td>100-2,000</td>
</tr>
<tr>
<td>AlphaMed Press</td>
<td>Oncology Organization</td>
<td>&lt;100</td>
</tr>
<tr>
<td>LiveStrong</td>
<td>Advocacy</td>
<td>&lt;100</td>
</tr>
</tbody>
</table>

**CEO Cancer Gold Standard Five Pillars**

Five focal areas, known as Pillars, are the CEO Cancer Gold Standard's framework to support worksite wellness, cancer prevention, and control activities. These areas include prevention, screenings, cancer clinical trials, quality treatment and survivorship, and health education and health promotion. Each of these Pillars guides the development of health programs and policies that promotes a culture of wellness.
Pillar #1: Prevention

Cancer prevention is the focus of Pillar 1 and is specific to five health behaviors: tobacco use, nutrition, physical activity, a healthy weight, and vaccinations. Because lifestyle factors contribute to 80% of cancer cases, this Pillar’s emphasis is to establish a standard for recommended worksite prevention activities.1

Tobacco Use

Tobacco use is a major cancer risk factor, causing over 20% of global cancer deaths and about 70% of global lung cancer deaths.2 As of 2012, about 18% of American adults are currently smoking, and smoking is responsible for over 480,000 deaths every year.3 Those exposed to second-hand smoke have increased risks for lung cancer, heart attacks, and strokes; most exposure to second-hand smoke occurs in the home or workplace. According to the Centers for Disease Control and Prevention (CDC), the only way to protect nonsmokers from second-hand smoke is to fully eliminate the act of smoking in indoor spaces.4

Nutrition

Nutritional intake has been linked to multiple types of cancers, with fruit and vegetable intake being seen as protective.5-7 Poor nutrition can also lead to obesity and obesity-related conditions. The latest statistics show that 1 in 3 American adults are obese.8 By encouraging healthy eating in the workplace, risks for developing some cancers, heart disease, diabetes, and osteoporosis are reduced.9

Physical Activity

Engaging in physical activity has been linked with a reduced risk of some cancers.10 Getting the right amount of physical activity can also help keep weight down, reduce blood pressure, and lower risks for diabetes, osteoporosis, and arthritis while also improving psychological well-being. The 2008 Physical Activity Guidelines for Americans recommends that adults need at least 150 minutes of moderate exercise every week,11 and recent research emphasizes the importance of physical activity across the entire cancer continuum.12-13 Workplaces can either help or hinder employees from meeting these guidelines.
Healthy Weight

Maintaining a healthy weight can reduce the risks of some cancers. A healthy weight is also important for overall health and helps to prevent and control diseases such as certain cancers, diabetes, heart disease, and high blood pressure. In addition to lowering disease risk, maintaining a healthy weight improves psychological well-being. With proper nutrition and physical activity, individuals can reach and maintain a healthy weight.

Vaccinations

The U.S. Food and Drug Administration has approved both Gardasil and Cervarix against the human papillomavirus vaccine (HPV), which is responsible for 70% of cervical cancer. The CDC recommends that all children ages 11-12 years of age should get the three-dose series of HPV vaccine. Teen boys and girls who did not get the vaccine when they were younger should get it during their adolescence. Young women can get the HPV vaccine through age 26, and young men can get vaccinated through age 21. The vaccine is also recommended for gay and bisexual young men (or any young man who has sex with men) and also for young men with compromised immune systems (including HIV) through age 26, if they did not get HPV vaccine when they were younger.

Pillar #2: Screenings

Promoting screenings is an important activity of CEO Cancer Gold Standard accredited worksites because early detection and treatment is critical to improve health outcomes for cancer patients. Three cancers – breast, cervical, and colorectal – have been shown to have the most favorable survival rate when diagnosed early. Because sources vary regarding specific screening guidelines, the updated CEO Cancer Gold Standard application emphasizes “evidence-based cancer screening exams – in ways that are age and gender appropriate, and that take into consideration individual risk/benefit – to detect certain cancers at an early stage, when management or treatment has the best chance for a positive outcome.”
Pillar #3: Cancer Clinical Trials

Clinical trials are a critical piece of the puzzle in the discovery process for new lifesaving drugs and for establishing improved prevention, diagnostic, and treatment methods for disease. Nearly all of the medicines and treatments in use today, from aspirin to targeted agents for cancer, are based on clinical trial results. The CEO Cancer Gold Standard, through education, attempts to dispel myths and raise awareness in the hopes of increasing participation in cancer clinical trials. For more information on opportunities to participate in cancer clinical trials, please visit www.clinicaltrials.gov.

Pillar #4: Quality Treatment and Survivorship

Quality Treatment

The Institute of Medicine defines quality treatment as “the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge.” Access to quality care is important to eliminate health disparities and increase the quality of life and years of healthy life for all employees and their families. Having insurance increases access to health care systems; it may not be sufficient, however, to ensure appropriate use of services or care that is of high quality. Increasingly, patients, physicians, and health care systems are seeking to develop “patient-centered care” as a demonstration of quality health care. An important tenet of patient-centered care is that the patient shares responsibility for communications with providers and becomes actively involved in decisions about treatment options, costs, and possible outcomes. Physicians engaged in quality patient-centered care are expected to communicate effectively and with clarity and empathy, and to engage in personal relationships with their patients. Employers seeking CEO Cancer Gold Standard accreditation are encouraged to ensure access to quality health care and access to and delivery of preventative health services and primary care in their communities. Current CEO Cancer Gold Standard requirements regarding quality treatment indicate benefit plans must provide coverage at Commission on Cancer-accredited programs and/or National Cancer Institute-designated cancer centers.
Survivorship

As of January 2012, the American Cancer Society estimated that there were 13.7 million American cancer survivors living in the U.S., a number that is expected to grow to 18 million by 2022.\textsuperscript{21} Traditionally, a person is considered a cancer survivor from the day of diagnosis through the rest of his or her life, living with, through, and beyond cancer. Long-term survivors of cancer may experience multiple co-morbidities, some of which are the result of their treatment; others, like high blood pressure, arthritis, diabetes, and obesity, may be a result of aging and lifestyle. Late effects of cancer treatment may be physiological or psychosocial, or both.\textsuperscript{22} Recent and mounting evidence suggests exercise and physical activity may be effective in reducing negative outcomes and improving both the physical and psychosocial health and well-being of cancer survivors.\textsuperscript{23}

Pillar #5: Health Education and Health Promotion

Health promotion and education of cancer prevention strategies have been successfully facilitated by lay or nonprofessional individuals (i.e., not doctors or nurses) for diverse people.\textsuperscript{24–25} For example, tobacco cessation programs have been shown to work well (more tobacco cessation and less exposure to second-hand smoke) in worksite settings.\textsuperscript{26–27} Research points to the fact that smokers have higher absenteeism than nonsmokers and that this absenteeism is reduced following smoking cessation.\textsuperscript{28–29} These are just some examples of how having health promotion and health education at your worksite is beneficial. Thus, we recommend a dedicated communication plan tailored to individual organizations that CEOs and others in leadership roles are made aware of or play a role in developing. Clearly communicating the value of prevention programs can help promote them throughout the workplace and lead to sustainability.
Winning the Gold: Telling Our Story

Applying for the Gold: Lessons Learned

Seeking Accreditation

The Texas A&M Health Science Center School of Public Health’s (School’s) core mission is “to prepare a health workforce to meet the needs of Texas.” Our organization employs 127 staff and faculty, 53 graduate research and teaching assistants, and 37 student workers. In our efforts to educate a new generation of public health professionals, we espouse practicing what we teach. For that reason, applying for the CEO Cancer Gold Standard accreditation was a way to show our students that the health of our School matters. Further, our example serves as a model to other universities applying for accreditation.

Lesson Learned: Seeking accreditation provided an opportunity to demonstrate that CEO Cancer Gold Standard accreditation supports our organization’s core values.

Getting Started

Our School’s pursuit of CEO Cancer Gold Standard accreditation began as part of a student internship project that mushroomed to a groundswell of support across all sectors of our worksite: students, staff, faculty, and administrators. We found that securing buy-in helped to generate a sense of pride and ownership to become a CEO Cancer Gold Standard accredited site. In doing so, we were able to get our worksite behind this endeavor, which included forming a Health and Wellness Committee charged with overseeing the application process. With the Committee’s leadership, we delegated assignments to complete the application, which allowed us to stay organized and on task.
The committee also planned, implemented, and evaluated wellness activities. These initiatives were developed to satisfy accreditation requirements and promote the health of our School.

Lesson Learned: Engaging employees in the CEO Cancer Gold Standard accreditation process is a way to secure buy-in.

A Healthy Campus

We knew our School was doing many things right to be an accredited site, but we lacked information to document our wellness activities. As we will discuss in this guidebook, a critical piece of the application is to make a case that your organization has an infrastructure that supports workplace health promotion.

Under the oversight of the Health and Wellness Committee, assessing the health of our campus was one of the hallmarks of our application experience. We also received assistance from wellness champions who contributed their time and expertise to this effort. In designing the 78-item needs assessment survey, our three objectives were to:

- Gather information to complete the CEO Cancer Gold Standard accreditation application,
- Provide a baseline to monitor progress in our worksite wellness initiatives, and
- Assess needs to inform our committee on possible gaps in health programming.

Using survey results, the Health and Wellness Committee identified our strengths and any deficits needing corrective actions. Data were also helpful to provide a picture of our employees’ and students’ health status, as well as their needs and interests for wellness programs. With this evidence, we planned interventions tailored for our worksite.

We structured the survey questions to align with the items listed in the “Are You Ready?” checklist found on the CEO Cancer Gold Standard website. While we used an earlier version of this resource, the questions asked on the current checklist can be modified for an organizational assessment in the same way. The questionnaire was particularly helpful in assessing employees’ perceptions about the corporate culture specific to the five Pillars. Below are two examples:
• To what extent do you agree SPH has a culture that values, supports, and promotes the prevention, screening, and early detection of cancer?
• To what extent do you agree SPH has a culture that values, supports, and promotes healthy food choices?

Lessons Learned: Assessing the health of our worksite was invaluable because it supplied us with needed information to complete our application.

Our Story

Our story is simple: SPH is a healthy place to work and attend school. From our assessment, we were able to demonstrate that we met the accreditation standards by addressing the key Pillars. In our initial application, we combined the Health Education and Health Promotion Pillar with the Prevention Pillar.

Tobacco-free Workplace

Our tobacco policy prohibits all forms of tobacco on site and in company vehicles. It warrants note that tobacco products include the newer e-cigarettes, which the FDA plans to regulate as ‘tobacco products’ as it already does with cigarettes, cigarette tobacco, roll-your-own-tobacco, and smokeless tobacco. Our assessment indicated that very few persons at SPH were smokers.

Nutrition

We fulfilled a sufficient number of the nutrition requirements with the following wellness initiatives:

• Contracted with the vending machine supplier to increase the availability of healthy options available to all.
• Emailed links on healthy eating while traveling to those going to conferences.
• Installed filtered water stations for refilling reusable water bottles to improve access to quality drinking water, which provided an alternative to high-sugar soft drinks or beverages.
• Purchased a refrigerator to encourage students and staff to bring healthful options from home. With the available microwaves in the dining area, these foods can be re-heated.
- Instituted healthy food options (e.g., fruits and vegetables) at business meetings.
- Role modeled eating healthy food at meetings through pictures posted on a bulletin board.
- Showcased leaders championing nutrition-related items for seasonal festivities (i.e., Thanksgiving meal planning).
- Posted flyers throughout the building highlighting healthy eating tips and encouraging our employees to drink water, etc.

**Physical Activity**

We were engaged in a variety of physical activity promotion activities:

- Highlighted leadership at the fitness facility on campus via digital newsletters.
- Posted health-related fitness happenings each month (e.g., fun runs for a cause taking place in the area).
- Promoted walking meetings.
- Disseminated information about our area’s walking trails and solicited input on ways to improve accessibility to these trails.
- Purchased two new pieces of commercial fitness equipment for our onsite workout facility.
- Established a plan to install a crosswalk that will serve to facilitate a safe passage to parking areas located further than 5 minutes from our buildings.
- Instituted a policy for subsidizing standing desks for our faculty.

**Screening/Early Detection**

- Sent email communications to faculty, staff, and students about early detection information:
  - Working with one’s provider to develop a plan for cancer screenings.
  - Cancer screening recommendations specific to age and gender.
- In digital messages, highlighted our leadership encouraging cancer screening.
- Featured different cancers in short newsletters each month.
Cancer Clinical Trials

- Communicated information related to participation in cancer clinical trials on television monitors shown in the entrance of our building and lunchroom.
- Sent emails encouraging our employees to participate in cancer clinical trial webinars.

Quality Treatment and Survivorship

We had comprehensive medical coverage for employees in place prior to application, which provided for quality prevention, diagnosis, and treatment services. SPH investigators have:

- Explored the components of a quality survivorship plan, including encouraging cancer survivors to increase their physical activity.
- Promoted communication and dissemination of cancer survivorship information, especially among adolescents and young adult cancer survivors.
Organization Readiness

The CEO Cancer Gold Standard accreditation is a stimulus to create a healthier worksite. Establishing a culture of wellness should permeate all levels of an organization, from administrators who sanction the allocation of resources to the employees who take ownership to practice healthy lifestyles. Because every worksite differs in its organizational make-up, its experience applying for CEO Cancer Gold Standard accreditation will be unique.

A visit to the CEO Cancer Gold Standard website provides an “Are You Ready?” checklist to determine your organization’s readiness to apply. This useful tool can serve as a starting point to gather information to complete your application. We recommend using this checklist as a guide rather than a test to determine whether or not your organization should pursue CEO Cancer Gold Standard accreditation. Oftentimes, areas of weakness can be addressed, which, once done, can pave the way for success in seeking accreditation!

“Are You Ready?” Checklist
http://www.cancergoldstandard.org/are-you-ready

Organizational Buy-in

The 3 C’s in Organizational Buy-in: Communication, Collaboration, and Champions

Securing buy-in from employees and management is a critical part of organizational readiness. Through our experience, we found communication, collaboration, and champions are three ways to build support across sectors in your worksite.

Communication

Communicating our intentions to apply for accreditation to administrators was the first step in the application process. We developed short fact sheets that were used to inform SPH leadership of the CEO Cancer Gold Standard accreditation. (See Appendix A.)
The emphasis of these resources was to highlight its benefits to our institution in terms of creating a healthier and more productive workplace. The advantages of CEO Cancer Gold Standard accreditation were part of discussions at SPH Executive Committee meetings. Administration support was vital to building capacity to plan and implement wellness activities that would demonstrate our organization’s capability to fulfill the requirements of becoming a CEO Cancer Gold Standard accredited site. Once we had administrators’ support in place, we moved forward in earnest with completing our application.

**Collaboration**

Establishing a culture of wellness requires collaboration across the levels of the organization’s hierarchy. The Interim Dean established a School-wide Health and Wellness Committee charged with promoting health and wellness for faculty, staff, and students. The Committee was comprised of faculty, staff, and students at various levels. The Committee’s mission was to “emphasize, encourage, and engage the SPH community to make healthy choices through individual and organizational change.” The Committee met monthly to discuss health and wellness-related activities and to plan activities to engage our workforce.

Overseeing our School’s ongoing health and wellness campaign was another major function of the Committee. Their engagement in all elements of our worksite’s health culture helped to build engagement throughout our organization. We believe it is a best practice for organizations that are considering applying for accreditation to build a team or committee that is representative of a cross-section of your organization’s senior and mid-level management. This collaborative effort will ensure both top-down and bottom-up buy-in.

Members of our School’s Health and Wellness Committee.
Champions

The primary function of a champion is to serve as an advocate for the wellness program. This individual is typically health-conscious and can serve as a role model and spokesperson. In sum, this person is a driving force to ensure that the initiative is accepted and maintained over time. In many cases, there may be several champions who each represent different segments of the organizational structure. Some of the qualities of a wellness champion include the following:

<table>
<thead>
<tr>
<th>Leader</th>
<th>Team player</th>
<th>Role model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organized</td>
<td>Passionate about living healthy</td>
<td>Resourceful</td>
</tr>
</tbody>
</table>

At SPH, our wellness champions were the Health and Wellness chair and support from members of the committee. These individuals were active in all aspects of our wellness initiatives: conducting pre- and post-test assessment, program recruitment, planning and implementing activities, and securing support from administration and employees. Through their involvement, we prepared and submitted the application in a timely manner. We also had champions who provided connections to other sources of support. One served on our university-wide Health and Wellness Committee, and another was chair of the Cancer Alliance of Texas, the state comprehensive cancer control program.
Preparing a Successful Application

Getting Started

Remember: Don’t Underestimate Your Organization’s Strengths

Overview

The big question you may have is, “How do you get started?” As we will discuss, filling out the application is not simply checking the boxes. Three documents are required to submit the application: Tobacco Free Policy, Preparer’s Certification, and CEO Affirmation. As discussed previously, the “Are You Ready” document will help in the preparation of the application. For Pillar 1, it is beneficial to evaluate your Tobacco Free Policy, because this is a difficult hurdle for many employers. Appendix B is Texas A&M University’s tobacco free policy as an example. The American Cancer Society and Partnership for Prevention are two reliable sources for information to draft your worksite’s policy.

Getting Started

Table 2 is an overview of what is required for accreditation. You will note in this table that wellness activities must be in operation. The application must be completed and submitted online. You will find it helpful to have a hardcopy of the application for your reference. For first-time applicants, register online and create an account at the following weblink: [http://cancergoldstandard.org/user/register](http://cancergoldstandard.org/user/register).

Once you have established your account, you can access the online application that is prepared in this format. There are four parts to the application: Gold Standard Accreditation Application, Tobacco Free Work Place Policy, Preparer’s Certificate, and CEO Affirmation. The application is organized by Pillar and includes an essay. To add your response, click to expand or collapse the Pillars. Under each Pillar, there are a series of boxes that must be checked, unless otherwise indicated. The red indicator light will change to yellow once you begin a section and will turn to green once a section has been successfully completed. It is not necessary to proceed in any particular order. Remember to “Save for Later” (at the bottom of the page) before exiting.
Table 2. At-a-Glance: Meeting CEO Cancer Gold Standards

<table>
<thead>
<tr>
<th>Must Do Wellness Activities</th>
<th>Sufficient Number Wellness Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pillar 1</strong> Tobacco Policy</td>
<td>Physical Activity</td>
</tr>
<tr>
<td>Vaccines: Benefit plans cover all FDA-approved and</td>
<td>Nutrition</td>
</tr>
<tr>
<td>CDC-recommended cancer prevention vaccines</td>
<td>Maintaining a healthy weight</td>
</tr>
<tr>
<td><strong>Pillar 2</strong> Screenings: Benefit plans cover breast,</td>
<td>Programs in place to facilitate appropriate cancer screenings</td>
</tr>
<tr>
<td>cervical, and colorectal screenings</td>
<td></td>
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<tr>
<td><strong>Pillar 3</strong> Employees provided education about</td>
<td>Cancer clinical trial links for more information</td>
</tr>
<tr>
<td>clinical trials</td>
<td></td>
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<tr>
<td>Ensure access to participation in cancer clinical</td>
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<tr>
<td>trials for employees and covered family members to</td>
<td></td>
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<tr>
<td>participate in cancer clinical trials.</td>
<td></td>
</tr>
<tr>
<td>*Note that the CEO Cancer Gold Standard does not</td>
<td></td>
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<tr>
<td>require family members to be covered, but if they</td>
<td></td>
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<tr>
<td>are, they must meet the requirements of the Standard.*</td>
<td></td>
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<tr>
<td><strong>Pillar 4</strong> Provide a few examples of where</td>
<td>Benefit plans provide access to cancer treatment</td>
</tr>
<tr>
<td>employees may be treated for cancer</td>
<td>at Commission on Cancer-accredited programs and/or NCI-designated</td>
</tr>
<tr>
<td>Demonstrate that you recognize the needs of</td>
<td>Cancer Centers</td>
</tr>
<tr>
<td>employees who are cancer survivors or are family</td>
<td></td>
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<tr>
<td>members/caregivers of cancer survivors</td>
<td></td>
</tr>
<tr>
<td><strong>Pillar 5</strong> Communication efforts address all</td>
<td>Programs and policies in place to facilitate special needs of cancer</td>
</tr>
<tr>
<td>areas of the CEO Cancer Gold Standard</td>
<td>survivors</td>
</tr>
<tr>
<td></td>
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<tr>
<td></td>
<td>Health education information provided to employees that promotes a</td>
</tr>
<tr>
<td></td>
<td>healthy behavior in ways appropriate to your organization</td>
</tr>
</tbody>
</table>

**Timeline**

Through our experience, we found there are six milestones leading to submitting your application:

1. Form a work group or wellness committee.

2. Individually and as a team, read through the application to understand the expectations of accreditation.
   - Mark items where information is unknown (e.g., tobacco policy or medical insurance provisions for cancer screenings).
• For those items where the requirement is in place, note where documentation can be located.

3. Register online to apply for accreditation.

4. Assign a member to gather information to support your responses.

5. Conduct an assessment to collect additional data for documentation.

6. Complete the application based on all the evidence that has been complied.

Table 3 exemplifies our accreditation timeline.

<table>
<thead>
<tr>
<th>Table 3. Application Preparation Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tasks</strong></td>
</tr>
<tr>
<td>Read and review application</td>
</tr>
<tr>
<td>Form Health and Wellness Committee; meet monthly</td>
</tr>
<tr>
<td>Conduct needs assessment and analyze</td>
</tr>
<tr>
<td>Implement wellness activities to address health programming gaps</td>
</tr>
<tr>
<td>Complete and submit application</td>
</tr>
<tr>
<td>Respond to CEO Cancer Gold Standard review team’s comments and resubmit</td>
</tr>
<tr>
<td>Notified CEO Cancer Gold Standard accredited!</td>
</tr>
</tbody>
</table>

Note: Timelines may vary greatly depending on the organization’s commitment and/or resources.

The time to complete each of these stages depends on the level of commitment in manpower hours and the amount of information that has to be collected. In some instances, wellness programs or activities need to be instituted to support your corporate culture of health. These milestones can also serve as a guide to plan your timeline to submit the application.

**Preparing the Application**

The **CEO Cancer Gold Standard** online application details three sections of requirements that must be satisfied. These are: health-related coverage items, tobacco policy, and evidence of the organization’s culture.
Section 1: Health-related coverage items related to screening benefits and other wellness services. Information supplied from your health insurance carrier is the best source to answer questions in this section.

Section 2: Tobacco Free Policy that includes providing a copy of this document. It is worth noting that electronic nicotine delivery systems (ENDS) are prohibited by the CEO Cancer Gold Standard Tobacco Free Policy. The accrediting organization considers situations in which the organization may not own or control its own space and thus may be concerned about their breadth of control.

Section 3: Provide evidence demonstrating your company’s culture of wellness. As we described, we used findings from our assessment to show how we were fulfilling the five Pillar standards.

Assess, Communicate, Target

Across worksites, small to large, seeking CEO Cancer Gold Standard accreditation involves taking ACTion specific to three preparation activities: assess, communicate, and target change. For each of these tasks, there are questions to determine readiness for CEO Cancer Gold Standard accreditation, action items to prepare the application, and supporting resources. The A.C.T. processes are described below.

Assess your organization’s wellness culture specific to environmental factors, employees’ health status, and existing health-related policies.

- What wellness activities do you have in place to demonstrate that your worksite satisfies the requirements for the five Pillars and their subtopics?
- What wellness activities are lacking that need to be addressed to comply with the CEO Cancer Gold Standard requirements?
- How do your employees view their company’s wellness culture specific to these five Pillars and subtopics?
Communicate assessment results to senior and mid-level management and employees.

- What are channels to communicate findings to the worksite?
- How accessible and convenient are these communication efforts to reach the greatest numbers (e.g., email distribution of surveys to reach all employees)? Are the results representative of the worksite population?
- What opportunities are available to solicit suggestions, ideas, or input from employees and management specific to areas of need (e.g., hosting a lunch to communicate results)?
- Have you secured buy-in from employees and management to implement proposed wellness activities (e.g., soliciting feedback on assessments prior to distribution, clearly communicating the importance and purpose of the assessments)?

**Action Items:**

- Create a needs assessment survey. A previously developed instrument can also be adapted for your worksite.
- Implement a survey with employees and management to assess how your company is addressing the CEO Cancer Gold Standards.
- Assess survey findings.

**Activity Resource:** Appendix C is a sample assessment tool.

- Develop a brief report (e.g., 2-5 pages) on survey findings.
- Use a variety of communication channels, and share findings with the worksite.
- Schedule meetings or short information sessions to disseminate findings.

**Activity Resource:** Appendix D is a template to develop a summary brief.
Target areas for change, and plan accordingly.

- Do you have an action plan developed that outlines specific wellness activities to adopt?
- Where can you find resources for tested programs that have been shown to be effective? These proven programs are typically called evidence-based programs or practices.
- What are low-cost or no-cost options in wellness programs that are easy to introduce and maintain over time?

**Action Items:**

- Prioritize needs, and identify wellness activities. Employee representation on the Wellness Committee is strongly recommended.
- Plan, market, and implement programs or activities shown to be effective (or evidence-based programs).
- Evaluate programs, and modify as needed.

**Activity Resources:** Appendix E Action Plan; Appendix F Cancer Prevention, Treatment, and Survivorship Web Resources.

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**Real-World Experience: Our Example**

**Evidence-Based Programs in Cancer Prevention**

Selecting research-tested or “evidence-based” programs or practices (EBPs) was an important consideration in choosing our wellness activities. A discussion on EBPs is beyond the scope of this guidebook. However, for those seeking accreditation, adapting or adopting EBPs in planning your health programs is recommended because these interventions are proven to work. While some programs are tested for a specific audience, you will find many that require minimal or no modifications to implement.

The National Cancer Institute (NCI) offers a plethora of EBPs ready for adoption in their research-tested intervention programs (RTIPs) website. Another helpful resource
found in RTIPs, Using What Works, is a user-friendly tutorial on this topic. The Community Guide is another highly recommended source for preventive services or programs that work.

NCI Research-tested Intervention Programs (RTIPs):  
The Community Guide:  
[http://www.thecommunityguide.org/index.html](http://www.thecommunityguide.org/index.html)

Our Example: Completing Our Application

Pillar 1: Prevention

*Tobacco-free Workplace*

- **What we did:** We retrieved a copy of our tobacco policy from Texas A&M University’s Risk and Compliance Office. Reviewing this document, we were able to provide evidence that SPH is a tobacco-free worksite. In addition, our needs assessment provided data about faculty/staff/student’s tobacco use habits and their views about the University’s policy covering this behavior.

- **What worked or did not work:** A tobacco-free policy helped us meet Pillar 1. This also made it easy to complete this portion of the application. However, identifying perceptions and behaviors about tobacco use required conducting a needs assessment.

- **What you need to know:** Familiarity with the person who oversees worksite policies is a must. A human resources representative is the likely point-of-contact to locate your organization’s tobacco-use policy. Organizations lacking a tobacco-use policy will need to work with mid- and senior-level management to institute this mandate.

*Nutrition*

- **What we did:** We implemented a number of approaches to improve eating habits among faculty, staff, and students. This included encouraging healthier foods at
meetings by including fruits and vegetables and capturing photos of these healthier foods to send around the School as reminders. We met with students to discuss how to provide foods at student meetings that went beyond the typical pizza and sodas. Most importantly, we purchased a refrigerator for students so they can bring healthy options for meals.

- **What worked or did not work:** While we can’t control all of the food intake at meetings and throughout the building, the accessibility of nutritious foods will make an impact on this first Pillar.

- **What you need to know:** It is hard to eat healthy if you just eat processed and prepared foods. Often, having a place to store and heat food that you make yourself will help you stay on track with healthy eating.

**Physical Activity**

- **What we did:** We organized a community walk and geocaching (GPS coordinate-based scavenger hunt) event during National Public Health Week. In addition, our onsite workout rooms at the College Station and McAllen campuses added a treadmill and elliptical machine. Finally, an interactive map of walkable areas was developed.

- **What worked or did not work:** Community events, such as walk-a-thon fundraisers, have helped encourage physical activity among employees. We’ve
tapped into these activities to encourage exercise among our employees. Because these events are primarily to benefit non-profit health organizations, we found promoting participation is a way to advance our worksite’s wellness mission. However, for sedentary employees, changing behavior is difficult, and incentives need to be considered.

- **What you need to know:** Onsite workout rooms and access to showers can help reduce barriers to more vigorous physical activity during the workday. Infrastructure for physical activity can also help shape policies that incentivize healthy activity for workers.

*Healthy Weight and Vaccines were added sections in the May 2014 application updates.*

As such, these categories were not explicitly addressed in our initial application.

**Pillar 2: Screenings**

- **What we did:** We communicated the need for screening with links to evidence-based recommendations and provided communication (via email) highlighting senior leadership encouraging cancer screening (photo of senior faculty posing with a screening message).

- **What worked or did not work:** We provided evidence-based recommendations based on strategies that have been successful. Increasing the visibility of leaders encouraging screening, while delivering regular messages about the importance of cancer screening, was successfully implemented and is ongoing. Again, our assessment (pre/post survey) was helpful in demonstrating improvements in our workforce, indicating we have a culture that values, supports, and promotes the prevention, screening, and early detection of cancer.

- **What you need to know:** The CDC and National Institutes of Health (NIH) are examples of trusted sources to locate evidence-based resources on screening guidelines. Simple, concise messages delivered in e-newsletters or flyers can be developed and distributed to your organization.
Pillar 3: Cancer Clinical Trials

- **What we did:** We utilized digital messages (i.e., monitors broadcasting content at entrances) to raise our workforce’s awareness about the availability of resources to find cancer clinical trials. We also delivered information about upcoming opportunities to take part in webinars focused on learning more about cancer clinical trials.

- **What worked or did not work:** We incorporated existing resources to improve our cancer clinical trial communications. Again, our assessment (pre/post survey) was critical in identifying improvements in our workforce, indicating our organization supports the transmission of information on accessing cancer treatment and clinical trials.

- **What you need to know:** While this may not seem to be an easy Pillar to address for non-medical organizations, with a little creativity, an organization can utilize existing resources to link individuals to helpful information.

Pillar 4: Quality Treatment and Survivorship

- **What we did:** We determined that we had adequate insurance coverage to meet the necessary qualifications for CEO Cancer Gold Standard accreditation.

- **What worked or did not work:** We contacted our insurance providers and staff benefits representative to ensure we met the standards needed for accreditation.

- **What you need to know:** The application should serve as a guide to what is needed for insurance coverage. Having the application checklist in hand when contacting appropriate representatives was crucial; as in all cases, we asked questions directly from the checklist application (i.e., exact wording) for specific coverage-related
items. In addition, a new requirement includes ensuring that health benefit plans provide access to cancer treatment at Commission on Cancer-accredited programs and/or National Cancer Institute-designated cancer centers.

**Pillar 5: Health Education and Health Promotion**

- **What we did:** We established a Health and Wellness Committee to organize our efforts and promote health among the students, faculty, and staff at the School. Some of the prevention activities covered in Pillar 1 came out of the Committee. We used several formats (digital media, email communication, flyers, posters, leading by example by having healthy food at meetings, etc.) to deliver health and wellness information to our worksite. In addition, monthly updates were sent to the entire School that featured community events, such as walking/running races, farmers’ markets, and community gardens. Also highlighted was the latest public health research related to healthy lifestyles.

- **What worked or did not work:** The Committee has been an essential part of our health promotion efforts. The group’s makeup includes staff, faculty, and students—all of which provide unique perspectives when forming ideas about health promotion in the School. Coordinating with our Health and Wellness Committee and employees allowed us to target weaknesses highlighted in our assessment. Again, the assessment allowed us to measure overall improvements in our health and wellness initiatives.

- **What you need to know:** There are several strategies and communication channels that can be utilized for health education and health promotion activities. Having a clear appraisal of our culture with specific questions aligned with the “Are You Ready?” checklist provided us with direction for health promotion activities, which also made it possible to measure change (improvement from baseline, or before the start of activities). This was true for all Pillars. We found that while we can provide information to workers, it cannot guarantee they will read what you send or put behavior changes into action. Our approach has been to aim for a wide
variety of audiences in a number of different formats (e.g., emailed updates, signage around the school, and Facebook posts).

Examples of health promotion activities: healthy eating at meetings, installation of a water filtration system, and communicating health messages in highly visible locations.
Commitment to the CEO Cancer Gold Standard

Accreditation is not an endpoint but a beginning of your organization’s commitment to the CEO Cancer Gold Standard. Life “post-accreditation” is a maintenance/sustainability stage that may include the following general activities:

- Ongoing evaluation of health promotion programs;
- Periodic reassessment of wellness activities; for example, discontinuing poorly attended interventions or modifying programs based on evaluation findings;
- Sustaining the Health and Wellness Committee’s membership;
- Implementing new programs to meet employees’ needs; and
- Updating information specific to cancer prevention science and other health-related research.

Post-Accreditation Phase

After achieving accreditation, the Health and Wellness Committee shifted its attention to maintenance and sustainability of our wellness efforts. Specifically, our aim was to institutionalize our worksite wellness program as part of the SPH culture. In so doing, our focus was on intermediate and long-term changes in our employees’ health behaviors and the SPH environment.

Highlighted below is a sampling of some SPH’s post-accreditation activities:

- Implementation of a monthly health newsletter.
- Development of a policy subsidizing standing desks for faculty members.
- Development of SPH “steps” signs placed near elevators that provide the distance (miles) within our offices.
- Monthly Health and Wellness Committee meetings to discuss updates and progress toward program goals and to develop action items that are delivered during our monthly meeting.
- Coordination with the Million Mile Month campaign to promote physical activity.
• Dissemination of the Health and Wellness survey findings to our organization’s administration and employees.
• Presentation to the Cancer Alliance of Texas (CAT) to share our accreditation success story and survey findings.
• Creation of this “Going for the Gold”: CEO Cancer Gold Standard Guidebook to assist worksites seeking accreditation.

Yearly Re-accreditation

Commitment to the “Gold” is an ongoing effort. Yearly re-accreditation through a simple application process is required to maintain the CEO Cancer Gold Standard recognition. After being accredited for one full calendar year, employers are required to affirm they are still meeting the requirements of the CEO Cancer Gold Standard as part of an annual re-accreditation. Typically, the re-accreditation form (1-2 pages) is sent out in January. The form outlines the five Pillars of the CEO Cancer Gold Standard and requires the signatures of your primary Gold Standard contact and CEO. Because the CEO Cancer Gold Standard is reviewed annually to ensure that it is based on the latest scientific evidence, the requirements may evolve. When that happens, existing CEO Cancer Gold Standard employers are “grandfathered” and given ample time to implement these new requirements.

While the renewal process is not as lengthy as the original application, verification that the five Pillars are being met should be maintained. Post-accreditation of your worksite wellness program should continue to focus on these areas, with an emphasis on prevention, and health education and promotion. Pillar 2, screening services, and Pillar 3, quality treatment and survivorship, are typically provided by your organization’s health care insurance. Education on these topics is important to activate employees to follow screening recommendations and, for those under treatment, to work with their doctor to ensure the best outcomes. As discussed previously, Pillar 5, clinical trials, requires simple activities to keep employees informed on how to participate in cancer research.
Appendices

Appendix A. Informational Fact Sheet Used with SPH Leadership

CEO Cancer Gold Standard*

WHAT IS THE CEO CANCER GOLD STANDARD?

The CEO Cancer Gold Standard™ is an accreditation that organizations can receive by meeting recommendations developed by the CEO Roundtable on Cancer to fight cancer in workplaces.

The School of Public Health already meets all or most of the required pillars and can serve as a mobilizing force within the Texas A&M University System for broader action.

Five pillars to address preventable cancer risk factors including:

◆ Tobacco use
◆ Nutrition
◆ Physical activity
◆ Prevention, screening and early detection
◆ Access to quality treatment and clinical trials

BRIEFING TO
TEXAS A&M
PUBLIC HEALTH SCIENCE

BENEFITS OF THE CEO CANCER GOLD STANDARD

This workplace program is a cost-effective way to improve employee wellness. Additionally, the program can benefit employees who are battling cancer with better treatment outcomes and the ability to return to work sooner.

Membership in the CEO Cancer Gold Standard has many benefits:

◆ Demonstrates national, state and community leadership
◆ Provides positive press opportunities
◆ Attracts and retains healthier employees
◆ Decreases health care utilization and medical costs
◆ Achieves economic return on investment

Please note there are individuals from the Texas A&M Health Science Center School of Public Health who can help with the application process and there are currently no fees for the accreditation process.

CURRENT ACCREDITED INSTITUTIONS INCLUDE:

Baylor Health Care System
Southwestern Medical Center
Harvard School of Public Health
Seton Healthcare Family

Going for the Gold: Achieving CEO Cancer Gold Standard Accreditation
Appendix B. Texas A&M University’s Smoking & Tobacco Use Policy

UNIVERSITY RULE

34.05.99.M1 Smoking and Tobacco Use
Approved July 19, 1996
Revised March 28, 2008
Revised September 11, 2012
Next Scheduled Review: September 11, 2015

Rule Statement

Texas A&M University has a vital interest in maintaining a healthy and safe environment for its students, faculty, staff and visitors. This rule identifies university property where smoking and tobacco use is restricted.

Definitions

Smoking shall have the meaning specified in System Policy 34.05 Smoking.

Tobacco means all forms of tobacco products including but not limited to cigarettes, cigars, pipes, water pipes (hookah), bidis, kretks, electronic cigarettes, smokeless tobacco, snuff and chewing tobacco.

University Property means property located in the State of Texas that is owned, operated, leased, occupied or under the administrative control of the President of Texas A&M University. For purposes of this rule, this includes but is not limited to all grounds, buildings and structures, sidewalks, parking lots, walkways, and all vehicles owned, leased or rented by Texas A&M University.

Official rule

1. REQUIREMENTS

1.1 Housing and athletic facilities. Texas A&M University owned and leased housing (apartments, residence halls), and all indoor air space of University owned athletic facilities and outdoor public seating areas in athletic arenas will be smoke-free.
1.2 Eating areas. Eating areas (dining halls, cafeterias, food courts, snack bars, University Club) will be smoke-free and tobacco-free.

1.3 Buildings and Vehicles. All other buildings, entrances to buildings, and vehicles, owned or leased under the administrative purview of the President of Texas A&M University will be entirely smoke-free and tobacco-free. This rule will apply to all indoor air space including foyers, entryways and classrooms, individual faculty and administrative offices, and sidewalks, parking lots, walkways, and attached parking structures immediately adjacent to all such buildings and structures.

1.4 On approval of the President, the smoking and tobacco restrictions described in this rule may be expanded to include all University Property in order to establish a tobacco-free campus.

2. RESPONSIBILITIES

2.1 It is the responsibility of all members of the campus community, including visitors, to observe these requirements. This rule relies on the thoughtfulness, consideration and cooperation of smokers and tobacco-users for its success. Those violating this rule should be reminded of this rule and asked to comply.

2.2 Department heads or others with purview over facilities shall ensure that the rule is communicated to everyone who occupies space in the facility.

2.3 The Vice President for Administration will provide signage upon request and Transportation Services will provide notice for University vehicles.

2.4 Violations of this rule may result in corrective action as prescribed by system policies and regulation and university rules and procedures. Visitors refusing to comply may be asked to leave campus.

3. MISCELLANEOUS

Texas A&M University is committed to supporting all students and employees who wish to stop using tobacco products. Information on tobacco and smoking are provided through links at http://employees.tamu.edu/employees/WorkLife/assistance/links.aspx#counseling and through the Student Counseling Service at http://www.scs.tamu.edu/.

Related Statutes, Policies, or Requirements

Supplements System policy 34.05, Smoking

Texas Penal Code § 48.01. Smoking Tobacco
Texas Labor Code § 411.103. *Duty of Employer to Provide Safe Workplace*


25 Texas Administrative Code, § Section 703.20

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**Contact Office**

[University Risk and Compliance](#)
Appendix C. Needs Assessment (Disseminated 2013)

The School of Public Health (SPH) has created a new Health and Wellness Committee with representation from faculty, students, and staff. We’d like your feedback on SPH as a workplace setting and culture that promotes healthy lifestyles and environments. Our goal is to assess the current situation and plan for future activities. Your participation in this survey is voluntary, and all responses will be anonymous. Thank you for taking the time to provide your feedback.

Are you a current student, faculty, or staff member?

1. Yes
2. No. If not, thank you, but this survey is for current employees and students.

*If NO is selected, then skip to the end of the survey.*

Section 1. Workplace Policies and Culture at SPH

To what extent do you agree with the following:

Rating scale: Strongly disagree (1), Disagree somewhat (2), Neutral (3), Agree somewhat (4), Strongly agree (5), Don’t know (6)

1. SPH supports a tobacco-free campus
2. SPH has a culture that values, supports, and promotes healthy food choices
3. SPH has a culture that values, supports, and promotes physical activity
4. SPH has a culture that values, supports, and promotes the prevention, screening, and early detection of cancer
5. SPH supports the transmission of information on accessing cancer treatment and clinical trials

How aware are you of the tobacco-free policy at SPH?

1. Not at all aware
2. Minimally aware
3. Somewhat aware
4. Very aware
Which statements best describe the current SPH tobacco use policies? True (1); False (2)

1. The policy bans the use of all tobacco products inside of the office and classroom buildings
2. It is permissible to consume tobacco in designated eating areas
3. It is permissible to consume tobacco products in one’s car in the parking lot
4. Visitors to campus are not bound by the University rule on smoking and tobacco
5. The policy bans the use of all tobacco products anywhere on campus, including all grounds, buildings and structures, sidewalks, parking lots, walkways, and all vehicles owned, leased or rented by Texas A&M University
6. Tobacco means all forms of tobacco products including but not limited to cigarettes, cigars, pipes, water pipes (hookah), bidis, kretteks, electronic cigarettes, smokeless tobacco, snuff and chewing tobacco

Section 2. Current lifestyle behaviors related to tobacco use, nutrition, and physical activity.

Are you a current tobacco user?

1. Yes
2. No

*If NO is selected, then skip to "Do You Usually."*

How long have you used tobacco products?

1. < 1 year
2. 1-2 years
3. 3-5 years
4. >5 years

What kind of tobacco products do you use? (Choose all that apply.)

1. Cigarettes
2. Cigars
3. Smokeless tobacco (e.g., snuff and chewing tobacco)
4. Electronic cigarettes

Where do you typically use tobacco products? (Choose all that apply.)

1. At home
2. At a friend’s home
3. In car
4. At work
5. Other
If other is selected, then skip to “Do you usually.”

If you are a smoker, do you regularly smoke at least a pack a day?
1. Yes
2. No
If yes, how much?

Have you ever tried to quit using tobacco products?
1. Yes
2. No

If you currently use tobacco, how likely are you to participate in an employer-sponsored tobacco-cessation program at your workplace?
1. Not at all likely
2. Somewhat likely
3. Very likely
4. Definitely likely
5. Not applicable

Do you usually:
- Rating scale: Never (1), Some of the time (2), Most of the time (3), All of the time (4)
  1. Bring your lunch to SPH
  2. Bring a snack to SPH to eat during the day
  3. See other people at SPH eating healthy food

At SPH, how often do you:
- Rating scale: Never (1), Less than 1 time per week (2), 1 time per week (3), 2 times per week (4), 3 times per week (5), 4 times per week (6), 5 times per week (7), More than 5 times per week (8)
  1. Drink water or unsweetened beverages
  2. Drink diet sodas (e.g., coke, pop)
  3. Drink non-diet sodas
  4. Eat chips and/or salty snacks
  5. Eat sweets (e.g., cookies, candy)
  6. Eat vegetables or fruits
Outside of SPH, how often do you:

Rating scale: Never (1), Less than 1 time per week (2), 1 time per week (3), 2 times per week (4), 3 times per week (5), 4 times per week (6), 5 times per week (7), More than 5 times per week (8)

1. Drink water or unsweetened beverages
2. Drink diet sodas (e.g., coke, pop)
3. Drink non-diet sodas
4. Eat chips and/or salty snacks
5. Eat sweets (e.g., cookies, candy)
6. Eat vegetables or fruits

How would you rate SPH in terms of access to healthy food?

Rating scale: Poor (1), Fair (2), Good (3), Very good (4), Excellent (5)

1. Being able to purchase healthy food at SPH
2. Having a place where you can store healthy food at SPH
3. Having a place where you can eat healthy food at SPH
4. Having healthy food options during meetings

Are you aware:

Rating scale: Not at all aware (1), Minimally aware (2), Somewhat aware (3), Very aware (4)

1. Of the fitness facility at SPH
2. Of the walking trails around the school

At SPH, how often do you:

Rating scale: None of the time (1), Some of the time (2), A lot of the time (3), Most of the time (4)

1. Walk up the stairs instead of taking the elevator
2. Stand at your desk
3. Walk during lunch or breaks
4. Use the SPH fitness room
5. Park at least a five-minute walk from SPH
6. Ride your bike to school/classes/work
How physically active are you outside of SPH?

1. I am not very active
2. I am somewhat active
3. I am moderately active
4. I am very active

How many days a week do you engage in physical activity that is moderate (e.g., brisk walking)?

1. 0 days
2. 1 day
3. 2 days
4. 3 days
5. 4 days
6. 5 days
7. 6 days
8. 7 days

On the days you are moderately active, on average how many minutes are you active each day? (These can be accumulated throughout the day.)

How many days a week do you engage in physical activity that is vigorous (e.g., running or playing soccer or basketball)?

1. 0 days
2. 1 day
3. 2 days
4. 3 days
5. 4 days
6. 5 days
7. 6 days
8. 7 days

On the days you are vigorously active, on average how many minutes are you active each day? (These can be accumulated throughout the day.)
How would you rate SPH in terms of:

Rating scale: Poor (1), Fair (2), Good (3), Very good (4)

1. Providing access to opportunities for physical activity
2. Having facilities to change and wash after physical activity
3. Making you aware of nearby places to walk or be physically active
4. Having available bike racks

If you receive health care coverage through your employer or as a student, how aware are you of your coverage for cancer prevention, screening, and early detection?

1. Not at all aware
2. Minimally aware
3. Somewhat aware
4. Very aware
5. Not applicable

Are you aware of who to contact for information about your health care coverage?

1. Not at all aware
2. Minimally aware
3. Somewhat aware
4. Very aware
5. Not applicable

To what extent are you aware of where you can access information about clinical cancer trials as a strategy for improving treatments for cancer patients/survivors?

1. Not at all aware
2. Minimally aware
3. Somewhat aware
4. Very aware

How interested are you in learning about cancer clinical trials in which you/others may be eligible to participate?

1. Not at all interested
2. Somewhat interested
3. Moderately interested
4. Extremely interested
How interested are you in having more activities planned around:

Rating scale: Not at all interested (1), Somewhat interested (2), Moderately interested (3), Extremely interested (4)
1. Promoting tobacco cessation
2. Promoting healthy eating
3. Promoting physical activity
4. Promoting prevention, screening, and early detection of cancer
5. Promoting access to quality treatment and clinical trials relating to cancer

What ideas (e.g., programs, opportunities) do you have for the Health and Wellness Committee to promote a healthier SPH?

Section 3. Respondent Characteristics

Are you a:
1. Faculty member
2. Staff member
3. Student (full-time)
4. Student (part-time)
5. Other

Is your role (check all that apply):
1. Educational
2. Research
3. Practice
4. Administrative

How long have you been at the School?
1. 1 year or less
2. 2-3 years
3. 4-9 years
4. 10 or more

Are you located:
1. Bryan/College Station Campus
2. McAllen Campus
3. Distance Education/Off Campus
4. Other____________________
How many hours per day are you typically at SPH?

1. 2 or less
2. 3-4
3. 5-6
4. 7-8
5. More than 8 hours

Are you:

1. Male
2. Female

Age:

1. 18-29
2. 30-39
3. 40-49
4. 50-64
5. 65 plus

Ethnicity (check one):

1. Hispanic or Latino
2. Not Hispanic or Latino
3. Prefer not to answer

Race (check ALL that apply):

1. American Indian/Alaska Native
2. Asian
3. Black or African American
4. Native Hawaiian or Other Pacific Islander
5. White
6. Prefer not to answer

Using your best estimate, what is your height, in inches?

Using your best estimate, what is your weight, in pounds?

Anything else you would like to tell the SPH Health and Wellness Committee?
Appendix D. Template for Needs Assessment Summary Brief

COMPANY NAME OR LOGO

Date

The purpose of the Workplace Assessment Summary Report is to provide an overview of the CEO Cancer Gold Standard accreditation, discuss health problems it addresses, and describe the benefits of achieving CEO Cancer Gold Standard accreditation. This report also summarizes your workplace assessment, presenting findings and conclusions, including documentation of specific action steps.

Instructions: Read each section below, and fill it out using the instructions. Once you have completed the section, delete the instructions that appear in italics.

[Start of Report]

Overview [1 paragraph]

This section consists of a single paragraph that succinctly describes the CEO Cancer Gold Standard accreditation. As part of this description, include a discussion about the five Pillars. A sample overview paragraph might look like this:

CEO Cancer Gold Standard is a workplace initiative to reduce the burden of cancer by improving the health of employees and their family members. Eliminating cancer is the vision of the CEO Cancer Gold Standard. The CEO Roundtable on Cancer, a non-profit organization comprised of chief executive officers representing major U.S. companies, developed the CEO Cancer Gold Standard based on the latest scientific evidence. It’s a comprehensive way of addressing cancer – beginning with prevention...and moving along the spectrum to early detection...and continuing on to ensuring access to high-quality care, including access to clinical trials. A CEO Cancer Gold Standard accreditation recognizes employers demonstrating their commitment to this effort. Accreditation is open to worksites regardless of the number of employees and level of involvement in workplace health promotion.

Problem [1-2 paragraphs]

This section consists of a short, one or two paragraph narrative describing the impact of cancer on your community. Tell the reader why this is a problem and for whom it is a problem. Use morbidity and mortality statistics to make your case. Also, include data about the financial toll of cancer, especially in terms of medical expenses and cost to society.
Solution [1-2 paragraphs]

In one or two paragraphs, concisely describe how CEO Cancer Gold Standard accredited worksites can address the problem with cancer prevention activities. Discuss how this program can benefit employees, their families, and employers. In your discussion, explain how a CEO Cancer Gold Standard accreditation will attract prospective employees and demonstrate to workers their organization's commitment to a culture of wellness.

Needs Assessment [1 paragraph]

State the purpose of the needs assessment and how data will be used to apply for CEO Cancer Gold Standard accreditation. Briefly explain how the needs assessment will provide evidence of your worksite's strengths and weaknesses in cancer prevention activities.

Methods (Optional) [1-3 paragraphs]

The Methods section is similar to describing procedures in a science experiment. This section is optional, depending on your readership. Be detailed but concise. This two to three paragraph section should describe the process used to conduct your survey. Include information about the questionnaire (e.g., number of questions, types of questions, its development, eligibility criteria, data collection procedures, and analysis).

Findings [Length varies; include graphs or chart]

This section reports on your survey results. Items to highlight include employee characteristics (or demographics), key findings, and changes that have occurred that are shown through the pre/post test surveys. Graphs or tables are best to tell your story. Oftentimes, these illustrations can make a powerful statement. Information can be presented in both a narrative and bullet format.

Conclusions [1 paragraph]

Start this section with a one-sentence statement that summarizes your results. Elaborate with a short discussion on the significance of your findings and implications for CEO Cancer Gold Accreditation. Conclude with recommendations to apply needs assessment results into real-world action steps. This will add value to the needs assessment and show its importance to employers and employees.

This template may be modified as needed.
Appendix E. Action Plan Template

Fill out one worksheet per program idea.

Program to be implemented:

Program Goal(s):

Date to be implemented:

Subcommittee Chair:

Subcommittee Members:

<table>
<thead>
<tr>
<th>Description/Outline of Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal(s)</td>
</tr>
<tr>
<td>Action Steps</td>
</tr>
<tr>
<td>Responsible Member(s)</td>
</tr>
<tr>
<td>Communication to Employees</td>
</tr>
<tr>
<td>Results (Outcomes)</td>
</tr>
</tbody>
</table>
Sample Action Plan Template
Fill out one worksheet per program idea.

Program to be implemented: Stretching class for employees
Program Goal(s): To improve the well-being and fitness status of employees
Date to be implemented: September 2014

Subcommittee Chair: Name

Subcommittee Members: Name #1, Name #2, Name #3, and Name #4

Description/Outline of Program

<table>
<thead>
<tr>
<th>Objective(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>By September 1, 2014, using pre and post-testing measurements as well as employee surveys, 50% of participating employees will report feeling less stress and tension in the workplace, as well as having a better understanding of the relationship between our bodies, stress, flexibility, and work.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Action Steps</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Find a qualified instructor</td>
</tr>
<tr>
<td>2. Determine location of classes</td>
</tr>
<tr>
<td>3. Determine class schedule – frequency and duration</td>
</tr>
<tr>
<td>4. Find necessary resources or equipment</td>
</tr>
<tr>
<td>5. Estimate costs</td>
</tr>
<tr>
<td>6. Determine main contact for the program</td>
</tr>
<tr>
<td>7. Make an advertising plan for class</td>
</tr>
<tr>
<td>8. Plan for evaluations – how often</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Responsible Member(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name #1: In charge of marketing the classes</td>
</tr>
<tr>
<td>Name #2: Find out costs involved</td>
</tr>
<tr>
<td>Name #3: In charge of pre and post-tests as well as surveys</td>
</tr>
<tr>
<td>Name #4: Search for instructor and room for the class</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Communication to Employees</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Announce in staff meetings</td>
</tr>
<tr>
<td>2. Posters in hallways and break rooms</td>
</tr>
<tr>
<td>3. Email to all company users</td>
</tr>
<tr>
<td>4. Possible media coverage (?)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Results (Outcomes)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Pre-test done before September 1, 2014</td>
</tr>
<tr>
<td>2. Surveys: Distributed in February and August</td>
</tr>
<tr>
<td>3. Post-test done before September 1, 2014</td>
</tr>
</tbody>
</table>

*Results to be compiled and presented at Staff Meeting in November 2014
Appendix F. Cancer Prevention, Treatment, and Survivorship

Web Resources for CEO Cancer Gold Standard’s Five Prevention Pillars

The aim of this appendix is to provide useful web-based information specific to the CEO Cancer Gold Standard’s Five Pillars: 1) prevention, 2) screenings, 3) cancer clinical trials, 4) quality treatment and survivorship, and 5) health education and health promotion.

<table>
<thead>
<tr>
<th>Organization and Description</th>
<th>Web Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Government Sources</strong></td>
<td></td>
</tr>
</tbody>
</table>
| Agency for Healthcare Research and Quality (AHRQ) | **Homepage:** [http://www.ahrq.gov/](http://www.ahrq.gov/)  
**Prevention Information** | | |
| • Produce evidence to make health care safer, higher quality, more accessible, equitable, and affordable |  
| Partners with the U.S. Department of Health and Human Services (HHS) | | |
| **Centers for Disease Control and Prevention (CDC)** | **Homepage:** [http://www.cdc.gov/](http://www.cdc.gov/)  
**Prevention Information** | | |
| • Works to protect America from health, safety, and security threats both foreign and domestic |  
• **General Cancer Prevention:** [http://www.cdc.gov/cancer/dcpc/prevention/](http://www.cdc.gov/cancer/dcpc/prevention/)  
• **Tobacco Use** [http://www.cdc.gov/tobacco/](http://www.cdc.gov/tobacco/)  
• **Nutrition:** [http://www.cdc.gov/nutrition/](http://www.cdc.gov/nutrition/)  
• **Physical Activity:** [http://www.cdc.gov/physicalactivity/everyone/guidelines/index.html](http://www.cdc.gov/physicalactivity/everyone/guidelines/index.html)  
• **Healthy Weight:** [http://www.cdc.gov/healthyweight/index.html](http://www.cdc.gov/healthyweight/index.html)  
• **Vaccines:** [http://www.cdc.gov/cancer/dcpc/prevention/vaccination.htm](http://www.cdc.gov/cancer/dcpc/prevention/vaccination.htm)  
**Screening Information:** [http://www.cdc.gov/cancer/dcpc/prevention/screening.htm](http://www.cdc.gov/cancer/dcpc/prevention/screening.htm)  
**Survivorship:** [http://www.cdc.gov/cancer/survivorship/index.htm](http://www.cdc.gov/cancer/survivorship/index.htm) |
<table>
<thead>
<tr>
<th>Organization and Description</th>
<th>Web Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Cancer Institute (NCI)</td>
<td><strong>Homepage:</strong> <a href="http://www.cancer.gov/">http://www.cancer.gov/</a></td>
</tr>
<tr>
<td><strong>Organization and Description</strong></td>
<td><strong>Web Resources</strong></td>
</tr>
<tr>
<td>- Part of the National Institutes of Health (NIH)</td>
<td><strong>Prevention Information</strong></td>
</tr>
<tr>
<td>- Conducts and supports research, training, health information dissemination, and programming with respect to cause, diagnosis, prevention, and treatment of cancer, along with rehabilitation and continuing care</td>
<td>- <strong>Tobacco Use</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Screening Information:</strong> <a href="http://www.cancer.gov/cancertopics/screening">http://www.cancer.gov/cancertopics/screening</a></td>
</tr>
<tr>
<td></td>
<td><strong>RTIPs</strong> is a searchable database of cancer control interventions and program materials and is designed to provide program planners and public health practitioners easy and immediate access to research-tested materials.</td>
</tr>
</tbody>
</table>
## Organization and Description

### National Institutes of Health
- Global leader in research, training, and education to promote the prevention and treatment of heart, lung, and blood diseases
- Stimulates research to determine the causes of diseases

### U.S. Department of Health and Human Resources (HHS)
- Health.gov
- Healthfinder.gov

## Web Resources

<table>
<thead>
<tr>
<th><strong>Organization and Description</strong></th>
<th><strong>Web Resources</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>National Institutes of Health</strong></td>
<td><strong>Homepage:</strong> <a href="http://www.nhlbi.nih.gov/">http://www.nhlbi.nih.gov/</a></td>
</tr>
<tr>
<td><strong>Prevention Information</strong></td>
<td></td>
</tr>
<tr>
<td>- <strong>Physical Activity</strong></td>
<td></td>
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<tr>
<td><strong>Screening Information:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>U.S. Department of Health and Human Resources (HHS)</strong></td>
<td><strong>Homepages:</strong></td>
</tr>
<tr>
<td><strong>Prevention Information</strong></td>
<td></td>
</tr>
<tr>
<td>- <strong>Healthy Weight:</strong> <a href="http://www.healthfinder.gov/HealthTopics/Category/everyday-healthy-living/physical-activity/watch-your-weight">http://www.healthfinder.gov/HealthTopics/Category/everyday-healthy-living/physical-activity/watch-your-weight</a></td>
<td></td>
</tr>
<tr>
<td><strong>Screening Information:</strong></td>
<td></td>
</tr>
<tr>
<td><a href="http://healthfinder.gov/HealthTopics/Category/doctor-visits/screening-tests">http://healthfinder.gov/HealthTopics/Category/doctor-visits/screening-tests</a></td>
<td></td>
</tr>
<tr>
<td><strong>Survivorship:</strong></td>
<td></td>
</tr>
<tr>
<td>Organization and Description</td>
<td>Web Resources</td>
</tr>
<tr>
<td>------------------------------</td>
<td>---------------</td>
</tr>
<tr>
<td><strong>U.S. Preventive Services Task Force</strong></td>
<td></td>
</tr>
<tr>
<td>• Independent volunteer panel of experts in prevention and evidence-based medicine</td>
<td></td>
</tr>
<tr>
<td>• Works to improve the health of preventive services, such as screenings</td>
<td></td>
</tr>
<tr>
<td><strong>Homepage:</strong> <a href="http://www.uspreventiveservicestaskforce.org/">http://www.uspreventiveservicestaskforce.org/</a></td>
<td></td>
</tr>
<tr>
<td><strong>Screening Information:</strong> <a href="http://www.uspreventiveservicestaskforce.org/Page/Name/recommendations">http://www.uspreventiveservicestaskforce.org/Page/Name/recommendations</a></td>
<td></td>
</tr>
<tr>
<td>– <strong>Breast Cancer:</strong> <a href="http://www.uspreventiveservicestaskforce.org/uspstf14/breastcancer/breastcancervid.htm">http://www.uspreventiveservicestaskforce.org/uspstf14/breastcancer/breastcancervid.htm</a></td>
<td></td>
</tr>
<tr>
<td>– <strong>Colorectal Cancer:</strong> <a href="http://www.uspreventiveservicestaskforce.org/uspstf08/colocancer/colors.htm">http://www.uspreventiveservicestaskforce.org/uspstf08/colocancer/colors.htm</a></td>
<td></td>
</tr>
<tr>
<td>– <strong>Cervical Cancer:</strong> <a href="http://www.uspreventiveservicestaskforce.org/uspstf/uspscerv.htm">http://www.uspreventiveservicestaskforce.org/uspstf/uspscerv.htm</a></td>
<td></td>
</tr>
<tr>
<td><strong>U.S. Surgeon General</strong></td>
<td></td>
</tr>
<tr>
<td>• Provides scientific information on how to improve health and reduce risk of illness and injury</td>
<td></td>
</tr>
<tr>
<td><strong>Homepage:</strong> <a href="http://www.surgeongeneral.gov/">http://www.surgeongeneral.gov/</a></td>
<td></td>
</tr>
<tr>
<td><strong>Prevention Information:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>World Health Organization</strong></td>
<td></td>
</tr>
<tr>
<td>• A United Nations agency focusing exclusively on health and striving to improve the quality of human life</td>
<td></td>
</tr>
<tr>
<td>• Stimulates and advances work on the prevention of diseases worldwide</td>
<td></td>
</tr>
<tr>
<td><strong>Homepage:</strong> <a href="http://www.who.int/en/">http://www.who.int/en/</a></td>
<td></td>
</tr>
<tr>
<td><strong>Prevention Information</strong></td>
<td></td>
</tr>
<tr>
<td>– <strong>Vaccines:</strong> <a href="http://www.who.int/topics/vaccines/en/">http://www.who.int/topics/vaccines/en/</a></td>
<td></td>
</tr>
<tr>
<td><strong>Screening Information:</strong> <a href="http://www.who.int/cancer/detection/en/">http://www.who.int/cancer/detection/en/</a></td>
<td></td>
</tr>
<tr>
<td>– <strong>Clinical Trials:</strong> <a href="http://www.who.int/topics/clinical_trials/en/">http://www.who.int/topics/clinical_trials/en/</a></td>
<td></td>
</tr>
<tr>
<td>– <strong>Quality Treatment:</strong> <a href="http://www.who.int/cancer/treatment/en/">http://www.who.int/cancer/treatment/en/</a></td>
<td></td>
</tr>
</tbody>
</table>
## Organization and Description

### Non-Profit Organizations

<table>
<thead>
<tr>
<th>American Cancer Society</th>
<th><strong>Web Resources</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Voluntary health organization that is dedicated to eliminating cancer by prevention, saving lives, and diminishing suffering through research, education, advocacy, and service</td>
<td><strong>Homepage:</strong> <a href="http://www.cancer.org/">http://www.cancer.org/</a></td>
</tr>
</tbody>
</table>

### Prevention Information

- **Tobacco Use:**
  - [http://www.cancer.org/healthy/stayawayfromtobacco/quit-for-life](http://www.cancer.org/healthy/stayawayfromtobacco/quit-for-life)

- **Nutrition:**

- **Physical Activity:**

- **Healthy Weight:**

- **Vaccines:**

### Screening Information:


- **Clinical Trials:**

- **Quality Treatment:**

### Survivorship:

References


